Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2005 calendar year, or tax year beginning SEP 1, 2005 and ending AUG 31,	2006
B Check if Please C Name of organization	mployer identification number
applicable use IRS	
	48-0891418
	elephone number
return Specific 200 N. Glebe Road 200	(703) 894-1776
Itina City or town, state or country, and ZIP + 4	Accounting method: Cash X Accrual
Arlington, VA 22203-3728	Other (specify)
must attach a comploted Schodule & (Form UUI) of UUII-F7)	ble to section 527 organizations.
H(a) is this a group return	
G Website: ►www.billofrightsinstitute.org H(b) If Yes, enter number	
J Organization type (check only one) ► X 501(c) (3) ◄ (insert no) 4947(a)(1) or 527 H(c) Are all affiliates inclu	
Check here	urn filed by an or-
organization need not file a return with the IRS, but if the organization chooses to file a return, be sure to file a complete return Some states require a complete return. I Group Exemption Nu	
	e organization is not required to attach
L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 3,576,382. Sch B (Form 990, 9	· ·
Part 1 Revenue, Expenses, and Changes in Net Assets or Fund Balances	33 3-10.000 1.7
1 Contributions, gifts, grants, and similar amounts received	
a Direct public support 1a 3,027,723	
b Indirect public support 1b	
c Government contributions (grants) d Total (add lines 1a through 1c) (cash \$ 3,279,244 • noncash \$)	
d Total (add lines 1a through 1c) (cash \$ 3,279,244. noncash \$)	1d 3,279,244.
Program service revenue including government fees and contracts (from Part VII, line 93)	2 113,115.
3 Membership dues and assessments RECEIVED	3
CE A Interest on courses and temperatures to investments	4 98,228.
4 Interest on savings and temporary cash investments 5 Dividends and interest from securities 6 a Gross rents 4 Interest on savings and temporary cash investments 5 Dividends and interest from securities 6 a Gross rents 6 a Gross rents	5
5 Dividends and interest from securities 6 a Gross rents 9 JUL 18 2007	
b Less rental expenses 6b	- ∤ <u>.</u>
b Less rental expenses c Net rental income or (loss) (subtract line on from line (a)) 7 Other investment income (describe >) 8 a Gross amount from sales of assets other (A) Securities (B) Other	6c
7 Other investment income (describe > (A) Convertes (A) Co	7
8 a Gross amount from sales of assets other than inventory 8 a Gross amount from sales of assets other than inventory 8 a Gross amount from sales of assets other than inventory	-
than inventory b Less cost or other basis and sales expenses 8b	
c Gain or (loss) (attach schedule)	-
d Net gain or (loss) (combine line 8c, columns (A) and (B))	8d
9 Special events and activities (attach schedule). If any amount is from gaming, check here	
a Gross revenue (not including \$ of contributions	
reported on line 1a)	
b Less direct expenses other than fundraising expenses 9b	
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c
10 a Gross sales of inventory, less returns and allowances 10a 82,327	<u>' •</u>
b Less cost of goods sold 10b 77,938	
${f c}$ Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) St ${f mt}$ 1	10c 4,389.
11 Other revenue (from Part VII, line 103)	3,468.
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12 3,498,444.
13 Program services (from line 44, column (B))	13 1,844,822.
14 Management and general (from line 44, column (C)) 15 Fundraising (from line 44, column (D)) 16 Payments to affiliates (attach schedule)	14 180,500.
15 Fundraising (from line 44, column (D))	15 582,799.
	16 2,608,121.
17 Total expenses (add lines 16 and 44, column (A)) 18 Excess or (deficit) for the year (subtract line 17 from line 12)	17 2,608,121. 18 890,323.
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19 2,936,105.
19 Net assets or fund balances at beginning of year (from line 73, column (A)) 20 Other changes in net assets or fund balances (attach explanation)	20 0.
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21 3,826,428.
523001 02-03-06 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.	Form 990 (2005)

				(D) are required for section trusts but optional for other	
Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule)					
(cash \$ noncash \$	0.				
If this amount includes foreign grants, check here	22	· · · · · · · · · · · · · · · · · · ·			
3 Specific assistance to individuals (attach				1	
schedule)	23		_		
4 Benefits paid to or for members (attach					
schedule)	24				
5 Compensation of officers, directors, etc.	* * 25	200,497.	88,219.	10,025.	102,253
6 Other salaries and wages	26	633,178.	509,778.	20,430.	102,970
7 Pension plan contributions	27	8,743.	7,161.	310.	1,272
8 Other employee benefits	28	57,570.	41,912.	1,630.	14,028
9 Payroll taxes	29	55,840.	42,192.	1,983.	11,665
Professional fundraising fees	30				
1 Accounting fees	31	133,959.		133,959.	
2 Legal fees	32	11,460.	2,239.	2,540.	6,681
3 Supplies	33	96,846.	23,864.	1,755.	71,227
4 Telephone	34	11,654.	7,680.	562.	3,412
5 Postage and shipping	35	170,625.	48,930.	2,846.	118,849
6 Occupancy	36	78,526.	58,767.	5,297.	14,462
7 Equipment rental and maintenance	37	9,488.	7,124.	567.	1,797
8 Printing and publications	38	238,902.	165,669.	785.	72,448
9 Travel	39	53,043.	29,640.	1,213.	22,190
0 Conferences, conventions, and meetings	-	345,731.	343,541.	180.	2,010
1 Interest	41	525.		525.	•
2 Depreciation, depletion, etc. (attach schedu	\vdash	14,351.	10,763.	861.	2,727
3 Other expenses not covered above (itemi	, 	• • • •			•
a	43a				
b	43b				
C	43c				
d	43d				
e	43e				-
f	431		*****		
See Statement 2	43g	487,183.	457,343.	<4,968.>	34,808
4 Total functional expenses. Add lines 22	— '''				
through 43. (Organizations completing					
columns (B)-(D), carry these totals to lines	.				
13-15)	44	2,608,121.	1,844,822.	180,500.	582,799
oint Costs. Check ▶ ☐ If you are follow					,.55
tre any joint costs from a combined educational ca	-		onted in (R) Program consi	nes? ▶ □	Yes X No
i "Yes," enter (i) the aggregate amount of these joir			ii) the amount allocated to		N/A
iii) the amount allocated to Management and gene	_		iv) the amount allocated to	· · · · · · · · · · · · · · · · · · ·	Ν/Δ

See Statement 3

Form **990** (2005)

Part III Statement of Program Service Accomplishments (See the instructions)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

	at is the organization's primary exempt purpose? educate the public about our country's Founding Principles.	Program Service Expenses
clie	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of ints served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) anizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
а	See Statement 4	
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	662,765.
b	See Statement 5	
_ c	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ See Statement 6	226,704.
d	(Grants and allocations \$) If this amount includes foreign grants, check here ► See Statement 7	648,587.
_	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ Other program services (attach schedule)	306,766.
e	(Grants and allocations \$) If this amount includes foreign grants, check here	
f		1,844,822.
		Form 990 (2005)

46 S 47 a A b L 48 a F b L	Cash - non-interest-bearing Savings and temporary cash investments Accounts receivable Less: allowance for doubtful accounts	47a		641,130.	45	_
46 S 47 a A b L 48 a F b L	Savings and temporary cash investments Accounts receivable	472		011/130.		6 817
48 a F		472		1,527,578.	46	6,817 2,817,565
48 a F		1 472	45 504			
48 a F	Less: allowance for doubtful accounts		45,601.	40 275		45 601
b L		47b		40,275.	47c	45,601
b L	Pledges receivable	48a	745,721.			
40 0	Less: allowance for doubtful accounts	48b		333,219.	48c	745,721
49 0	Grants receivable			49		
50 F	Receivables from officers, directors, trustees,	ı				
а	and key employees		50			
·	Other notes and loans receivable	51a				
	ess allowance for doubtful accounts	51b		222 242	51c	170 660
- · · · ·	nventories for sale or use		-	323,343.	52	178,669
I	Prepaid expenses and deferred charges		¬。. ┌¬ <i></i>	34,740.	53	33,686
	nvestments - securities		Cost		54	
	nvestments · land, buildings, and equipment: basis	55a				
	equipment, basis	334				
b	_ess: accumulated depreciation	55b			55c	
	nvestments - other				56	
- 1	and, buildings, and equipment: basis	57a	107,924.			
4	Less. accumulated depreciation Stmt 8	57b	75,480.	34,325.	57c	32,444
58 C	Other assets (describe Program re	Lated in	nvestment)	145,000.	58	32,444 72,500
				2 070 610		2 022 002
	Total assets (must equal line 74). Add lines 4	5 through 58		3,079,610. 143,505.	59 60	3,933,003 96,096
1	Accounts payable and accrued expenses Grants payable		 	143,303.	61	20,000
1 -	Deferred revenue			· · · · · · · · · · · · · · · · · · ·	62	
	Loans from officers, directors, trustees, and k	ev employees			63	
I	Tax-exempt bond liabilities	,,,		-7	64a	
1	Mortgages and other notes payable				64b	
65 C	Other liabilities (describe Refundable	advano	ces)		65	10,479
66 7	Fatal liabilities Add lass CO through CE			143,505.	66	106,575
	Total liabilities. Add lines 60 through 65) izations that follow SFAS 117, check here	► X and	complete lines	143,303.	00	100/3/3
	67 through 69 and lines 73 and 74.	a.i.a	somplete lines			
67 L	Unrestricted			2,109,201.	67	2,197,838
68 T	Temporarily restricted			826,904.	68	1,628,590
69 P	Permanently restricted	_			69	
Organi	izations that do not follow SFAS 117, chec	k here 🕨 🗌	and			
C	complete lines 70 through 74.					
70 C	Capital stock, trust principal, or current funds				70	
1	Paid-in or capital surplus, or land, building, an				71	
72 F	Retained earnings, endowment, accumulated				72	
1	fotal net assets or fund balances (add lines 67 thr	-	s 70 through 72,	2 026 105	70	2 926 429
1	column (A) must equal line 19, column (B) must eq Fotal liabilities and net assets/fund balance		3 and 72	2,936,105. 3,079,610.	73 74	3,826,428 3,933,003

PE	Reconciliation of Revenue per Audited Financial Statements With Revenue per Reinstructions)	etur	n (See the
a	Total revenue, gains, and other support per audited financial statements	а	3,498,444.
b	Amounts included on line a but not on Part I, line 12:		
1	Net unrealized gains on investments		
2	Donated services and use of facilities b2		
3	Recoveries of prior year grants		
4	Other (specify):		
	Add lines b1 through b4] b_	0.
C	Subtract line b from line a	C	3,498,444.
đ	Amounts included on Part I, line 12, but not on line a:		
1	Investment expenses not included on Part I, line 6b		
2	Other (specify):		
	Add lines d1 and d2	đ	0.
е	Total revenue (Part I, line 12). Add lines c and d	e	3,498,444.
Pŧ	art IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per	Ret	urn
а	Total expenses and losses per audited financial statements	а	2,608,121.
b	Amounts included on line a but not on Part I, line 17:		
1	Donated services and use of facilities b1] :	
2	Prior year adjustments reported on Part I, line 20]	
3	Losses reported on Part I, line 20		
4	Other (specify):		
	Add lines b1 through b4	Ь	0.
C	Subtract line b from line a	С	2,608,121.
d	Amounts included on Part I, line 17, but not on line a:		1
1	Investment expenses not included on Part I, line 6b		
2	Other (specify):		
	Add lines d1 and d2	d	0.
e	Total expenses (Part I, line 17). Add lines c and d	е	2,608,121.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Victoria Hughes	President	-	-	
200 N. Glebe Road, Suite 200				
Arlington, VA 22203	40.00	180,000.	20,497.	0.
Vonda Holliman	Secretary/Tre	asurer		
200 N. Glebe Road, Suite 200				
Arlington, VA 22203	3.00	0.	0.	0.
Mark Humphrey	Chairman/Dire	ctor		
200 N. Glebe Road, Suite 200				
Arlington, VA 22203	1.00	0.	0.	0.
Robert L. Testwuide	Director			
200 N. Glebe Road, Suite 200				
Arlington, VA 22203	1.00	0.	0.	0.
Arthur Hall	Director			
200 N. Glebe Road, Suite 200				
Arlington, VA 22203	1.00	0.	0.	0.
Tony Woodlief	Director			
200 N. Glebe Road, Suite 200				
Arlington, VA 22203	1.00	0.	0.	0.
KBH, LLC.	Management Se	rvices		
200 N. Glebe Road, Suite 200				
Arlington, VA 22203	3.00	5,040.	0.	0.
		<u> </u>	L	

Form **990** (2005)

	990 (2005) Bill of Rights Instit			48-0891	<u>418</u>		age 6
	t V-A Current Officers, Directors, Trustees, and Ke		 	,		Yes	No
75 a	Enter the total number of officers, directors, and trustees permitted timeetings	o vote on organization bu	isiness at board	4			
b	Are any officers, directors, trustees, or key employees listed in Form listed in Schedule A, Part I, or highest compensated professional and Part II-A or II-B, related to each other through family or business relation individuals and explains the relationship(s)	d other independent conti tionships? If "Yes," attach	ractors listed in Sc	hedule A, dentifies	75b	х	
C	Do any officers, directors, trustees, or key employees listed in Form listed in Schedule A, Part I, or highest compensated professional an Part II-A or II-B, receive compensation from any other organizations, organization through common supervision or common control?	d other independent cont	ractors listed in Sc	hedule A,	75c		Х
	Note. Related organizations include section 509(a)(3) supporting orgif "Yes," attach a statement that identifies the individuals, explains the relations describes the compensation arrangements, including amounts paid to each in	ship between this organization		ization(s), and			
d	Does the organization have a written conflict of interest policy?				75d	X	
Par	t V-B Former Officers, Directors, Trustees, and Ke						
	Benefits (If any former officer, director, trustee, or key er						
	the year, list that person below and enter the amount of co	mpensation or other bene	its in the appropri	(D) Contributions		E) Expe	•
_	(A) Name and address None	(B) Loans and Advances	(C) Compensation	employee benefit plans & deferred compensation plan	à	ccount er allow	and
·							
					+		-
					+		
					1		
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			<u> </u>	-	+		
Par	t VI Other Information (See the Instructions)					Yes	No
76	Did the organization engage in any activity not previously reported to	the IRS? If "Yes," attach	n a detailed				
	description of each activity				76	├	X
17	Were any changes made in the organizing or governing documents if "You" attach a professor of the changes	but not reported to the IR	S?		77	 	Х
78 a	If "Yes," attach a conformed copy of the changes. Did the organization have unrelated business gross income of \$1,00	0 or more during the year	covered by this re	turn?	78a		х
	If "Yes," has it filed a tax return on Form 990-T for this year?	, ,		N/A	78b	<u> </u>	
79	Was there a liquidation, dissolution, termination, or substantial conti	· · · · · · · · · · · · · · · · · · ·			79	 	X
30 a	Is the organization related (other than by association with a statewic membership, governing bodies, trustees, officers, etc., to any other	=		ion	80a		х
b	If "Yes," enter the name of the organization ► N/A	and check whether it is	exempt or	nonexempt			
81 a	Enter direct or indirect political expenditures. (See line 81 instruction	=	81a	0.			
	Did the organization file Form 1120-POL for this year?				81 b]	X
52316	/02-03-06				Form	9 90	(2005)

	1990 (2005) Bill of Rights Institute	48-089	1418		age 7
	rt VI Other Information (continued)			Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge	e or at substantially			
	less than fair rental value?		82a		X
b	If "Yes," you may indicate the value of these items here. Do not include this				
	amount as revenue in Part I or as an expense in Part II.	NT / D			ĺ
	(See instructions in Part III.)	N/A	4		
83 a	Did the organization comply with the public inspection requirements for returns and exemption application		83a	Х	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	N/A	83b		1,,
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions tax deductible?	N/A	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	N/A	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	N/A	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	tion received a			
	waiver for proxy tax owed for the prior year.				
C	Dues, assessments, and similar amounts from members	N/A	╛		
d	Section 162(e) lobbying and political expenditures	N/A	_]		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	N/A	╛		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f	N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 89	5f			
	to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the		-		
	following tax year?	N/A	85h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on				
	line 12 86a	N/A			
b	Gross receipts, included on line 12, for public use of club facilities 86b	N/A	7		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a	N/A	7		
b	Gross income from other sources. (Do not net amounts due or paid to other sources		7		
	against amounts due or received from them.)	N/A			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation of	r partnership,	7		
	or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 3				
	If "Yes," complete Part IX		88		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:				
	section 4911 ► 0 • , section 4912 ► 0 • , section 4955 ►	0.			
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			1	
	transaction during the year or did it become aware of an excess benefit transaction from a prior year?				
	If "Yes," attach a statement explaining each transaction		89b	l	X
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under	er	`		
	sections 4912, 4955, and 4958	>			0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization	▶			0.
90 a	List the states with which a copy of this return is filed ▶None				
b	Number of employees employed in the pay period that includes March 12, 2005	90b			14
91 a		ne no ► (703)	894	-17	76
	Located at ▶ 200 N. Glebe Road, Suite 200, Arlington, VA	ZIP + 4 ▶	2220	3-3	728
b	At any time during the calendar year, did the organization have an interest in or a signature or other auth	ority		_	
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	ıal		Yes	No
	account)?		91b		X
	If "Yes," enter the name of the foreign country				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Ba	nk			
	and Financial Accounts.				
C	At any time during the calendar year, did the organization maintain an office outside of the United States	?	91c	[X
_	If "Yes," enter the name of the foreign country ► N/A		1		-
92	Section 4947(a)(1) nonexempt chantable trusts filing Form 990 in lieu of Form 1041- Check here			▶ [
	and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 92	N/	Α	_
				000	(200E)

					,
Note: Enter gross amounts unless otherwise indicated.	(A)	d business income (B)	(C)	ded by section 512, 513, or 514 (D)	(E) Related or exempt
93 Program service revenue:	Business	Amount	Exclu- sion	Amount	function income
a Training seminar fees			code		113,065.
b List rental income	533110	50.	_		
a <u>Hibe Tenedi Income</u>	333110		_		
		<u> </u>		· · · · · ·	
0	 	— ——— —			
e	 				
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments	L				
95 Interest on savings and temporary cash investments			14	98,228.	
96 Dividends and interest from securities			ļ		
97 Net rental income or (loss) from real estate:		······			
a debt-financed property					
b not debt-financed property	ļ				
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets					
other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					4,389.
103 Other revenue.					
a Other income	}				3,468.
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		50.		98,228.	120,922.
105 Total (add line 104, columns (B), (D), and (E))					219,200.
Note: Line 105 plus line 1d, Part I, should equal the amo					
Note. Line 105 plus line 10, Fart I, Should equal the arm	ount on line 12	, Part I.			
Part VIII Relationship of Activities to the			t Pur	rposes (See the instructi	ons.)
	Accompli	shment of Exemp			-
Part VIII Relationship of Activities to the	Accomplis	shment of Exemp (E) of Part VII contributed			-
Part VIII Relationship of Activities to the Line No. Explain how each activity for which income is reported.	Accomplisorted in column for such purpos	shment of Exemp (E) of Part VII contributed es)	l impor	tantly to the accomplishment	of the organization's
Part VIII Relationship of Activities to the Line No. ■ Explain how each activity for which income is represent purposes (other than by providing funds to the search of	Accomplisorted in column for such purpos	shment of Exemp (E) of Part VII contributed es) .nars – furt	her	tantly to the accomplishment	of the organization's
Part VIII Relationship of Activities to the Line No. Explain how each activity for which income is represented by the exempt purposes (other than by providing funds to the exempt purposes (other than by providing funds to the exempt purposes (other than by providing funds to the exempt purposes (other than by providing funds to the exempt purposes (other than by providing funds to the exempt purposes (other than by providing funds to the exempt purposes (other than by providing funds to the exempt purposes (other than by providing funds to the exempt purposes (other than by providing funds to the exempt purposes (other than by providing funds to the exempt purposes (other than by providing funds to the exempt purposes (other than by providing funds to the exempt purposes (other than by providing funds to the exempt purposes (other than by providing funds to the exempt purposes). 93a Fees for teacher training the exempt purposes (other than by providing funds to the exempt purposes).	Accomplisored in column for such purpose ng semi of investigation	shment of Exemp (E) of Part VII contributed es) nars – furt entory for e	her duc	tantly to the accomplishment s educational ational purpo	of the organization's purpose.
Part VIII Relationship of Activities to the Line No. Explain how each activity for which income is represented by the exempt purposes (other than by providing funds of the search of t	Accomplisored in column for such purpose ng semi of investigation	shment of Exemp (E) of Part VII contributed es) nars – furt entory for e	her duc	tantly to the accomplishment s educational ational purpo	of the organization's purpose.
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Part VIII Relationship of Activities to the Line No. Explain how each activity for which income is represented to educate the principles. Part IX Information Regarding Taxable [Right of the Company	Accomplisored in column for such purposing semi of investable the Subsidiarions	shment of Exemp (E) of Part VII contributed (es) nars - furt entory for e ne public ab es and Disregard (C)	her duc	s educational ational purpo our country'	purpose. se. s Founding
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Part VIII Relationship of Activities to the Line No. Explain how each activity for which income is represent purposes (other than by providing funds to exempt purposes (other than by providin	Accomplisored in column for such purpose ng semi of investable the Subsidiaries st	shment of Exemp (E) of Part VII contributed es) nars - furt entory for e ne public ab es and Disregard (C) Nature of activities	her duc out	tantly to the accomplishment s educational ational purpo our country' ntities (See the Instructio (D) Total Income	purpose. se. s Founding ms.) (E) End-of-year assets
Part VIII Relationship of Activities to the Line No. Explain how each activity for which income is represented by providing funds to exempt purposes (other than by providing funds to exempt purpo	orted in column for such purpose ng semi of investable the Subsidiarion state of the semi	shment of Exemp (E) of Part VII contributed es) nars - furt entory for e te public ab es and Disregard (C) Nature of activities	her duc out ed Er	tantly to the accomplishment s educational ational purpo our country' ntities (See the instruction (D) Total income	purpose. se. s Founding (E) End-of-year assets
Part VIII Relationship of Activities to the Line No. Explain how each activity for which income is represent purposes (other than by providing funds to exempt purposes (other than by providing f	orted in column for such purpos ng semi of invelocate the Subsidiarion state the state st	shment of Exemp (E) of Part VII contributed es) nars - furt entory for e ne public ab es and Disregard (C) Nature of activities ed with Personal ectly, to pay premiums on	her duc out	s educational ational purpo our country' ntities (See the Instruction (D) Total Income	of the organization's purpose. se. s Founding (E) End-of-year assets e instructions.) Yes X No
Part VIII Relationship of Activities to the Line No. Explain how each activity for which income is represent purposes (other than by providing funds to exempt purposes (other than by providing f	orted in column for such purpos Ing semi of inverted to the column of semi of	shment of Exemp (E) of Part VII contributed es) nars — furt entory for e ne public ab es and Disregard (C) Nature of activities ed with Personal ectly, to pay premiums on y, on a personal benefit co	her duc out	s educational ational purpo our country' ntities (See the Instruction (D) Total Income	purpose. se. s Founding (E) End-of-year assets
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Part VIII Relationship of Activities to the Line No. Explain how each activity for which income is represent purposes (other than by providing funds to exempt purposes (other than by providing funds	Accomplish	shment of Exemp (E) of Part VII contributed es) nars — furt entory for e te public ab es and Disregard (C) Nature of activities ed with Personal ectly, to pay premiums on y, on a personal benefit co accompanying schedules and il information of which prepare T-12-07 Date Date	Benea persontract?	tantly to the accomplishment s educational ational purpo our country' ntities (See the Instruction (D) Total Income efit Contracts (See the Instruction yellow the best of my knowledge a Holliman, Transport of the Contract of the Instruction of the Contract of the Instruction	of the organization's purpose. se. s Founding ons.) (E) End-of-year assets e instructions.) Yes X No Yes X No
Part VIII Relationship of Activities to the Line No. Explain how each activity for which income is represent purposes (other than by providing funds to exempt purposes (other than by providing fu	Accomplished in column for such purpose in suc	shment of Exemp (E) of Part VII contributed es) nars — furt entory for e te public ab es and Disregard (C) Nature of activities ed with Personal ectly, to pay premiums on y, on a personal benefit co). accompanying schedules and il information of which prepare 7-12-07 Date Dat 0 7	Bene a persontract?	tantly to the accomplishment s educational ational purpo our country' ntities (See the Instruction (D) Total Income efit Contracts (See the Instruction y knowledge a Holliman, Transition of the Dest of my knowledge a Holliman, Transition of the Contract of the Instruction y knowledge a Holliman, Transition of the Dest of my knowledge of the Instruction of the Dest of the Instruction of the Dest of the Instruction of the I	purpose. se. s Founding ns.) (E) End-of-year assets e instructions.) Yes X No Yes X No ge and belief, it is true,
Part VIII Relationship of Activities to the Line No. Explain how each activity for which income is represent purposes (other than by providing funds to exempt purposes (other than by preparer) to the funds preparer (other than of signature of officer) Paid Preparer's Signature of officer	Accomplished in column for such purpose in semi of investigate the subsidiarion of investigate in semi of investig	shment of Exemp (E) of Part VII contributed es) nars — furt entory for enterprise public above and Disregard (C) Nature of activities ed with Personal ecity, to pay premiums on the companying schedules and ill information of which prepare 2-12-07 Date Date O 7	Benea persontract?	tantly to the accomplishment s educational ational purpo our country' ntities (See the Instruction (D) Total Income efit Contracts (See the Instruction yellow the best of my knowledge a Holliman, Transport of the Contract of the Instruction of the Contract of the Instruction	purpose. se. s Founding ns.) (E) End-of-year assets e instructions.) Yes X No Yes X No ge and belief, it is true,
Explain how each activity for which income is represent than by providing funds and seempt purposes (other than by providing funds are exempt purposes (other than by providing funds are exempt). Part ix	Accomplished in column for such purpose in semi of investigate the subsidiarion of investigate in semi of investig	shment of Exemp (E) of Part VII contributed es) nars — furt entory for enterprise public above and Disregard (C) Nature of activities ed with Personal ecity, to pay premiums on the companying schedules and ill information of which prepare 2-12-07 Date Date O 7	Benea persontract?	tantly to the accomplishment s educational ational purpo our country' ntities (See the Instruction (D) Total Income effit Contracts (See the Instruction (D) Total Income onal benefit contract? onts, and to the best of my knowled by knowledge a Holliman, Transition onto the contract of the contrac	purpose. se. s Founding ns.) (E) End-of-year assets e instructions.) Yes X No Yes X No ge and belief, it is true,

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1545-0047

2005

Employer identification number Name of the organization Bill of Rights Institute 48 0891418 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See page 1 of the instructions List each one If there are none, enter "None") d) Contributions to employee benefit plans & deferred compensation (b) Title and average hours (e) Expense (a) Name and address of each employee paid (c) Compensation per week devoted to account and other more than \$50,000 position allowances Claire Griffin 200 N. Glebe Rd. Education Program Suite 200, Arlington, VA 22203 40.00 91,973. 7,226. Kimberly Ash 200 N. Glebe Rd. Marketing Suite 200, Arlington, VA 22203 40.00 80,094 3,823. Christa Floresca 200 N. Glebe Rd. Development Suite 200, Arlington, VA 22203 40.00 74,266. 3,070. 200 N. Glebe Rd. Dir Prof. Developmt Brett Helm Suite 200, Arlington, VA 22203 66,468 40.00 9,266. Eric Langborgh 200 N. Glebe Rd. Dir Donor Relations 40.00 Suite 200, Arlington, 22203 65,634. VA 11,126. Total number of other employees paid 1 over \$50,000 Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None") (c) Compensation (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service Raffa 1899 L Street, NW, Ste. 600, Washington, DC 20036 Accounting 108,726. Inland Sea Productions MO 6410272,080. 1600 Genesee, Suite 328, Kansas City, Total number of others receiving over \$50,000 for professional services 0 Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None" See page 2 of the instructions.) (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation None Total number of other contractors receiving over 0 \$50,000 for other services

chedule A (Form 990 or 990-EZ) 2005 Bill of Rights Institute	48-08914	18	Page 2
Part III Statements About Activities (See page 2 of the instructions)		Yes	No
During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence	ence		\top
public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the)		ĺ
lobbying activities 🕨 \$ \$ (Must equal amounts on li	ne 38, Part VI-A, or		
line i of Part VI-B)	1	<u> </u>	<u> </u>
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations			
checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities			
During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contrustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with whice person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question)	ch any such		
attach a detailed statement explaining the transactions) a Sale, exchange, or leasing of property?	20	1	X
a Sale, exchange, or leasing or property?	<u> 2a</u>		┝
b Lending of money or other extension of credit?	26		<u>x</u>
c Furnishing of goods, services, or facilities?	20		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Part V-A,	Form 990 2d	X	
		†	\vdash
e Transfer of any part of its income or assets?	2e		X
a Do you make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how			
you determine that recipients qualify to receive payments)	3a		X
b Do you have a section 403(b) annuity plan for your employees?	<u>3b</u>	<u> </u>	<u> </u>
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	30	<u> </u>	X
a Did you maintain any separate account for participating donors where donors have the right to provide advice			_
on the use or distribution of funds?	4a		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	46		X
Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)			
he organization is not a private foundation because it is. (Please check only ONE applicable box.)			
5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)			
6 A school Section 170(b)(1)(A)(II) (Also complete Part V)			
7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(III)			
8 A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)			
9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hosp and state	ital's name, city,		
O An organization operated for the benefit of a college or university owned or operated by a governmental unit. Sec	tion 170(b)(1)(A)(iv)		
(Also complete the Support Schedule in Part IV-A)			
1a X An organization that normally receives a substantial part of its support from a governmental unit or from the gen	eral public		
Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
11b A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fe	es, and gross		
receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more that			
its support from gross investment income and unrelated business taxable income (less section 511 tax) from busing by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-			
An organization that is not controlled by any disqualified persons (other than foundation managers) and supports	organizations described i	n	
(1) lines 5 through 12 above, or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check			
the type of supporting organization Type 1 Type 2	Туре 3		
Provide the following information about the supported organizations. (See page 6 of the instru	ctions)		
(a) Name(s) of supported organization(s)		Line nun from ab	
14 Decrease the experience are stated to test for each to the control of the cont			
An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instruction	Schedule & (Form 990 c	- 000 E	7) 20

ra	Note: You may use the	iomplete only if you che e worksheet in the insti	ecked a box on line 10 ructions for converting	, 11, or 12.) Use cash from the accrual to the	method of acc e cash method o	ountin of acco	g. unting.
	ndar year (or fiscal year nning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001		(e) Total
15	Gifts, grants, and contributions received (Do not include unusual	2 760 919	1 570 710	1 020 005	1 200 0	E E	6 576 676
16	grants See line 28)	2,700,010.	1,5/6,/16.	1,028,085.	1,209,0	55.	6,576,676.
<u>16</u> 17	Membership fees received Gross receipts from admissions.						
.,	merchandise sold or services						
	performed, or furnishing of						
	facilities in any activity that is related to the organization's						
	charitable, etc., purpose	78,169.	19,932.	54,998.	48,0	68.	201,167.
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	36,780.	22,107.	15,975.	31,0	19.	105,881.
19	Net income from unrelated business						
	activities not included in line 18						
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
21	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge						
22	Other income Attach a schedule Do not include gain or (loss) from sale of capital assets						
23	Total of lines 15 through 22			1,099,058.			6,883,724.
24	Line 23 minus line 17			1,044,060.			6,682,557.
25	Enter 1% of line 23	28,758.	16,208.	10,991.	12,8		122 (51
26	Organizations described on lines 1					26a	133,651.
b	Prepare a list for your records to sho unit or publicly supported organizati		•	•			
	Do not file this list with your return		•	ded the amount shown in	I IIII e 20a	26b	1,926,988.
C	Total support for section 509(a)(1) t				•	26c	6,682,557.
d	Add Amounts from column (e) for l	_	05,881. 19		•		
	, ,	22	26b	1,926,98	8. ▶	26d	2,032,869.
e	Public support (line 26c minus line 2	26d total)				26e	4,649,688.
	Public support percentage (line 26				<u> </u>	26f	69.5795%
27	Organizations described on line 12						•
	records to show the name of, and to		ach year from, each "disq	ualified person " Do not fi	le this list with yo	ur retui	rn. Enter the sum of
	***************************************	N/A	10	000	1000		
	(2004) For any amount included in line 17 ti	(2003)	•	002)	(200	•	to chave the name of
b	and amount received for each year, f		·				
	described in lines 5 through 11b, as			· · · · · · · · · · · · · · · · · · ·			-
	the larger amount described in (1) o			· · ·			
	(2004)	(2003)		002)	(200)1)	
C	Add Amounts from column (e) for l						
		20		21		27c	N/A
d	Add Line 27a total		d line 27b total			27d	N/A
e	Public support (line 27c total minus	•	001 ()	► 1 azr1	NT / 7	27e	N/A
1 -	Total support for section 509(a)(2) t				N/A ▶	37.	N/A %
g	Public support percentage (lin Investment income percentage	•			1	27g 27h	N/A % N/A %
	Unusual Grants: For an organization						
9	show, for each year, the name of the creturn. Do not include these grants in	ontributor, the date and ar	mount of the grant, and a	brief description of the n	ature of the grant	Do not	file this list with your

If you answered "Yes" to either 34a or b, please explain using an attached statement

1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50,

Schedule A (Form 990 or 990-EZ) 2005

35

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers Paid staff or management (Include compensation in expenses reported on lines c through h.) c Media advertisements Mailings to members, legislators, or the public e Publications, or published or broadcast statements Grants to other organizations for lobbying purposes Direct contact with legislators, their staffs, government officials, or a legislative body

h Railies, demonstrations, seminars, conventions, speeches, lectures, or any other means

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Ο.

Amount

Nο

Schedule A (Form 990 or 990-EZ) 2005

Total lobbying expenditures (Add lines c through h.)

	VII Information Reg		d Transactions and	Relationships With Noncha	ritable				
5	501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting organization to a noncharitable exempt organization of								
	(i) Cash ii) Other assets				51 a(i) X a(ii) X				
	other transactions (i) Sales or exchanges of asse	ts with a noncharitable exempt organ	nization		b(i) X_				
	ii) Purchases of assets from aiii) Rental of facilities, equipment	noncharitable exempt organization ent, or other assets			b(ii) X b(iii) X				
(iv) Reimbursement arrangeme (v) Loans or loan guarantees				b(iv) X b(v) X				
Ċ	b(vi) X								
	-	mailing lists, other assets, or paid ei e is "Yes," complete the following sch	• •	ilways show the fair market value of the	c X				
g	oods, other assets, or services	given by the reporting organization nent, show in column (d) the value of	If the organization received	less than fair market value in any	N/A				
(a) Line no	(b)	(c) Name of noncharitable exi		(d) Description of transfers, transactions, ar					
					· · · · · · · · · · · · · · · · · · ·				
(code (other than section 501(c) Tyes," complete the following)(3)) or in section 527? schedule N/A	one or more tax-exempt org	anizations described in section 501(c) of the	Yes X No				
	(a Name of or) ganization	(b) Type of organization	(c) Description of relatio	nship				
					· · · · · · · · · · · · · · · · · · ·				
523151 02-03-06				Schedule A (F	Form 990 or 990-EZ) 2005				

Form 990 Page 2

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
]	Computers System development and	Varies	SL	3.00	16	62,271.			62,271.	46,624.		6,616.
2		Varies	SL	7.00	16	22,652.			22,652.	2,513.		6,803.
] 3	Telephone	Varies	SL	5.00	16	7,975.		:	7,975.	7,975.		0.
	Furniture * Total 990 Page 2	Varies	SL	15.00	16	15,026.	:		15,026.	4,017.		932.
	Depr					107,924.		0.	107,924.	61,129.	0.	14,351.
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Form 990	s Sold ne 10	Statement 1	
Income			
2. Returns and all	lowances	82,327	82,327
5. Gross profit ()	sold (line 13)	77,938	4,389
Cost of Goods Sold			
7. Merchandise pur8. Cost of labor	eginning of year	323,343 47,017	
10. Other costs .	supplies	<113,753>	256,607
	nd of year	178,669	77,938

Form 990	Other		Statement 2	
Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
Professional fees List rental Web design Inventory write-off Bad debt expense	172,027. 20,635. 60,572. 113,753. 72,500.	157,028. 13,300. 60,572. 113,753. 72,500.	4,629.	10,370. 7,335.
Other NEH indirect cost allocation	47,696.	23,019. 17,171.	7,574.	17,103.
Total to Fm 990, ln 43	487,183.	457,343.	<4,968.>	34,808.

Form 990 Office	Statement 3			
Name of Officer, etc.	Compensation	Employee Ben. Plans	Expense Accounts	Totals
Victoria Hughes	180,000.	20,497.		200,497.
A. Program Services	79,200.	9,019.		88,219.
B. Management and General	9,000.	1,025.		10,025.
C. Fundraising	91,800.	10,453.		102,253.
Total Program Services				88,219.
Total Management and Genera	10,025.			
Total Fundraising	102,253.			
Total Officer, etc., Compe	nsation include	ed on Parts V	-A and V-B	200,497.

Form 990

Statement of Program Service Accomplishments

Statement

Description of Program Service One

Teacher Development Conferences & Seminars: In 2006, Bill of Rights Institute (the Institute) trained 2,076 teachers — benefiting the 200,000 students they teach each year. By focusing on founding principles such as religious liberty, federalism, and citizenship, each program provides History and Civics teachers with the tools and training needed to educate young people about America's founding principles and civic values. The Institute's annual Summer Institute was held at George Washington's Mount Vernon for 150 teachers who are now better equipped to educate young people about Mount Vernon as the intellectual crossroads of our Founding.

	Grants	Expenses
To Form 990, Part III, line a		662,765.

Form 990

Statement of Program Service Accomplishments

Statement

5

Description of Program Service Two

Instruction Materials: Designed to supplement standard U.S. History and Civics textbooks, the Institute released the following educational resources in 2006.

Faces of Freedom in American History - A teacher's guide that uses biographical essays and primary source documents to introduce middle school students to individuals who used freedoms protected by the First Amendment to achieve other political and civil rights.

Conflict and Continuity: The Story of American Freedom - A teacher's guide for high school students that explores First Amendment issues past and present.

						Grants	Expenses
То	Form	990,	Part	III,	line b		226,704.

Form 990

Statement of Program Service Accomplishments

Statement

6

Description of Program Service Three

Teacher Outreach: The Institute's marketing plan has reached more than 28,000 middle school and high school teachers. This plan includes the use of catalogue mailings, e-mail newsletters, presentations at teacher conferences, and advertising in teacher magazines. Nearly 25,000 teachers received our e-mail newsletters each week. Our web site registered an average of 80,000 teacher visits each month, with the average visit lasting 13 minutes. The newsletters and web site contain teaching strategies and lesson plan ideas to engage students with America's Founding principles and civic values.

	Grants	Expenses
To Form 990, Part III, line c		648,587.

Form 990	Statement o	of :	Program	Service	Accomplishments	Statement	7

Description of Program Service Four

Student Education Programs: In 2006, the Institute began the development of programs to directly engage students with the Constitution. These include student websites www.DoYouHaveTheRight.org, www.BeingAnAmerican.org, and www.CitizenBee.org. Web sites include a Student Study Guide to the Constitution. Also, web sites include information about the student essay contest "Being An American", assistance for students preparing to participate in a Citizen Bee, as well as other educational activities and resources.

			Grants	Expenses
To Form 990,	Part III, line d	=		306,766.
Form 990	Depreciation of As	sets Not Held for	Investment	Statement 8
Description		Cost or Other Basis	Accumulated Depreciation	Book Value
Computers System develor enhancements Telephone	opment and	62,271. 22,652. 7,975.	53,240. 9,316. 7,975.	9,031. 13,336. 0.
Furniture	n 990, Part IV, ln 5	15,026.	75,480.	10,077.

Explanation of Relationship Form 990 Part V-A, Line 75b

Statement

Individual's Name

Title or Role

Mark Humphrey

Chairman/Director

Individual's Name

Title or Role

Vonda Holliman

Secretary/Treasurer

Explanation of Relationship

M. Humphrey is an officer and V. Holliman is an employee of KBH, LLC.

Form **8868** (Rev. December 2008)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

0.000	<u> </u>							
• If you are	e filing for an Automatic 3-Month Extension, complete only Part I and check this bo	x	▶ ☑					
	e filing for an Additional (not automatic) 3-Month Extension, complete only Part II (eplete Part II unless you have already been granted an automatic 3-month extension on a							
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies nee		neu Form 6006.					
	, , ,	•	abask this hav					
and comple	I (c)(3) corporations required to file Form 990-T and requesting an automatic 6-month ste Part I only		🕨 🔲					
All other co	prporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form income tax returns.	7004 to req	quest an extension o					
one of the r Form 8868 group return	Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month au returns noted below (6 months for section 501(c)(3) corporations required to file Form 9 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you fins, or a composite or consolidated Form 990-T. Instead, you must submit the fully comp 88. For more details on the electronic filing of this form, visit www.irs.gov/efile and click or	990-T). How ile Forms 99 pleted and s	vever, you cannot fil 90-BL, 6069, or 8870 signed page 2 (Part i					
Type or print								
File by the	Number, street, and room or suite no. If a P.O. box, see instructions.		0891418					
due date for filing your	200 N. GLEBE ROAD, SUITE 1050							
retum. See instructions,	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ARLINGTON, VA 22203-3728							
Check type	of return to be filed (file a separate application for each return):							
Form 99	Form 990-T (corporation)		Form 4720					
☐ Form 99	=		Form 5227					
Form 99		=	Form 6069					
☐ Form 99	90-PF	Ц	Form 8870					
Telephone If the org If this is the the who	e No. ► (703) 894-1776 FAX No. ► () anization does not have an office or place of business in the United States, check this for a Group Return, enter the organization's four digit Group Exemption Number (GEN) le group, check this box ► □ . If it is for part of the group, check this box	box .	▶ □					
until _ for the ► □	est an automatic 3-month (6 months for a section 501(c)(3) corporation required to file 4/16/07 , 20 , to file the exempt organization return for the organization organization return for: calendar year 20	named abo	ove. The extension is					
▶ ☑	tax year beginning 09/01 , 20 05, and ending 08	3/31	, 20 <u>06</u> .					
2 If this	tax year is for less than 12 months, check reason: Initial return Final return	☐ Change	in accounting perio					
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tainy nonrefundable credits. See instructions.	x, 3a	\$					
	application is for Form 990-PF or 990-T, enter any refundable credits and estimated to ents made. Include any prior year overpayment allowed as a credit.	ex 3b	\$					
c Balan depos	ice Due. Subtract line 3b from line 3a. Include your payment with this form, or, if require sit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payme m). See instructions.	d, nt	4					
	you are going to make an electronic fund withdrawal with this Form 8868, see Form 84	153-EO and	Form 8879-EO					

Fórm	8868	(Rev.	12-2004)

Page	2
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	200 (11011 12 200 1)			1 agc 2
If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this box				
Note: Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.				
• If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).				
Part II Additional (not automatic) 3-Month Extension of Time - Must file Original and One Copy.				
Time	Name of Exempt Organization		Employer identifica	tion number
Type of print.			40 000141	. 0
File by th			48-0891418 For IRS use only	
extended due date filing the	10 200 N. Glebe Road. Suite 1050		To the use only	
return S instruction	ee Crty, town or post office, state, and ZIP code For a foreign address, see instructions			
Check type of return to be filed (File a separate application for each return)				
X Form 990 Form 990-EZ Form 990-T (sec 401(a) or 408(a) trust) Form 1041-A Form 5227 Form 8870				
Form 990-BL Form 990 PF Form 990-T (trust other than above) Form 4720 Form 6069				
STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.				
The books are in the care of ▶ The Organization				
Telephone No ► (703) 894-1776 FAX No. ► (703) 894-1791				
If the organization does not have an office or place of business in the United States, check this box				
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this				
box 🕨 🔛 . If it is for part of the group, check this box 🕨 🔛 and attach a list with the names and EINs of all members the extension is for				
4	request an additional 3-month extension of time until July 16, 2007			_
5 1	· · · · · · · · · · · · · · · · · · ·		AUG 31, 200	
6	If this tax year is for less than 12 months, check reason: Initial return Fina	l return	Change in acco	ounting period
	State in detail why you need the extension			
	Additional time needed to compile third party i	ntormat	ion neccesa	ary_to
	file a complete and accurate return.		···-	
	If this application is for Form 990 BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less nonrefundable credits. See instructions	any	\$	
	If this application is for Form 990 PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868			
	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instruction		FTD \$	N/A
Signature and Verification				
Under penalties of periory. I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form				
Signati	ire Title CPA		Date ▶ 4-11-0	7
Notice to Applicant - To Be Completed by the IRS				
We have approved this application. Please attach this form to the organization's return.				
We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due				
date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections				
otherwise required to be made on a timely return. Please attach this form to the organization's return.				
We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to				
file. We are not granting a 10-day grace period.				
We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested				
	Other			
	Ву			
Director				
Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.				
	Name			
	Rogers & Company PLLC			
Type or prin	Number and street (include suite, room, or apt. no.) or a P.O. box number			
•	0300 Booke Boulevala, Buile 000			
523832 05-01-0	City or town, province or state, and country (including postal or ZIP code) S Vienna, VA 22182			